Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	e 2017 ca	lendar year, or tax year	beginning			, and e	nding	•	•		
В	Check if	applicable:	C Name of organization	Nuclear Energ	gy Institute, Inc.			D Emplo	yer identif	fication numbe	r	
	Address	change	Doing business as		-							
\equiv		_	Number and street (or P.0	D. box if mail is not	delivered to street	address)	Room/suite	52-12091	24			
Ш	Name ch	ange	1201 F Street, NW				1100	E Teleph	one numbe	er		
	Initial retu	urn	City or town		Sta	ite	ZIP code	202 720	000			
\equiv			Washington		DC		20004-121	8 202 739-	5000			
\sqsubseteq	rinai returr	n/terminated	Foreign country name	Foreign	province/state/cou	nty	Foreign postal	code				
\square	Amended	d return						G Gross i	eceipts \$		116,44	9,158
П	Annlicatio	on pending	F Name and address of prin	cipal officer				H(a) Is this a group retu	urn for aubor	rdinatas?	Jvos F	X No
ш.	пррпоап	on penang	Maria Korsnick 1201 F	•	a 1100 Washir	acton D	20004 121				Yes	No
						ī		If "No," attach a			_ 165	
1 7	Tax-exem	pt status:	501(c)(3) X 501(c	e) (6) <	(insert no.)	4947(a)(1) or 527 ₄	II NO, attacira	a 1151. (SEE	instructions)		
J \	Nebsite	e: Nw	w.nei.org					H(c) Group exemption	on number	· >		
KF	orm of o	rganization:	X Corporation T	rust Associa	ation Other	>	L Yea	ar of formation: 199)4 М	State of legal do	omicile:	DC
P	art I	Su	mmary						-			
_	1		escribe the organization	n's mission or	most significan	t activitie	es: The	Nuclear Energy I	nstitute	(NFI) is the		
မွ	1 '		rganization for the nucle									
au			national and global po			ilidusii y d	and participal	.03 111				
Activities & Governance	1 _											
ĕ	2		his box 🕨 if the or	•		_			1 1	net assets.		
Ö	3		of voting members of t						3			49
တ	4		of independent voting						4			48
ij	5	Total nu	mber of individuals em	ployed in caler	ndar year 2017	(Part V,	line 2a)		5			146
÷	6	Total nu	mber of volunteers (est	imate if neces	sary) . ,				6			
Ä	7a	Total un	related business reven	ue from Part V	III, column (C)	, line 12 .			7a		1	3,960
	b		elated business taxable						7b			1,022
								Prior Year	•	Curre	nt Year	
a	8	Contribu	utions and grants (Part '	VIII, line 1h).					0			0
Revenue	9	Program	n service revenue (Part	VIII, line 2g).				53,4	96,531		54,78	32,610
è e	10	•	ent income (Part VIII, c	•					307,414			20,310
ď	11		evenue (Part VIII, colum						31,060			5,723
	12		renue—add lines 8 throug				,	54.3	35,005			8,643
	13		and similar amounts pai						13,608			5,195
	14		paid to or for members						0			0,100
(0	15		other compensation, em					20.0	19,358		31 40	1,344
Expenses	16a		onal fundraising fees (F					20,0	0		01,10	0
Sen	b		ndraising expenses (Pa				0		J			
Ξ	17		kpenses (Part IX, colum			۵۱		23.6	319,915		24.28	32,897
	18		penses. Add lines 13-1	1		,		·	52,881			9,436
	19		e less expenses. Subtra				C 20)		117,876			9,207
- S	: 13	revenu	e iess experises. Oublit	actimic 10 mon	111110 12			Beginning of Curre			of Year	0,201
ets (20	Total as	sets (Part X, line 16).						58,699			80,925
Ass Bal	21		bilities (Part X, line 26)						396,852			16,458
Net Assets or Fund Balances	22		ets or fund balances. S						38,153			34,467
	art II		nature Block	450000000000000000000000000000000000000		<u> </u>		1,0	700,100			1, 101
			y, I declare that I have examin	ed this return, inclu	iding accompanying	g schedules	and statements	, and to the best of my	knowledg	 je		
and	belief, it i	is true, corre	ect, and complete. Declaration	of preparer (other	than officer) is base	ed on all inf	ormation of which	n preparer has any kn	owledge.			
Sig	n											
	_		Signature of officer					Date	е			
Here												
			Type or print name and title									
		Prin	t/Type preparer's name		Preparer's signatu	ire		Date	-	PTIN		
Pa	id	N 4 C 4	thow E Donniman					11/5/2010	Check self-emp	X if	125060	1
Pre	eparei	r —	thew F Penniman	D' 0=	A 110			11/5/2018			25969	1
Us	e Only	y —	's name ► Matthew F					Firm's EIN				
		•	i's address ► 13826 Day		-			Phone no.	(301)) 275-9420		
Ма	y the IF	RS discus	s this return with the pr	eparer shown	above? (see in	struction	s)			X Y	'es	No

The Nuclear Energy Institute (NEI) is the policy organization for the nuclear energy and lesh nuclear flowers in the nuclear energy and participates in both the national and global policy-making process. 2 Did the organization undertake any significant program services during the year which were not listed on the port from 990 or 990-EZ? If "Yes," describe these new services on Schedule 0. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services. If "Yes," describe these new services on Schedule 0. 4 Describe the organization's program service accomplishments for each of its three largest organization services. The total expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses. And revenue, I any, for each program service reported. 4a (Code:	Pa	rt III Statement of Program Service Accomplishments
The Nuclear Energy Institute (NEI) is the policy organization for the nuclear energy and technologies industry and participates in both the national and global policy-making process. 2 Did the organization undertake any significant program services during the year which were not listed on the prior brom 990 or 990-E27 if "Yes." describe these new services on Schedule O. 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services, services? If "Yes." describe these changes on Schedule O. 4 Describe the organization's program service accomplishments for each of its three largest drogram services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. 4 (Code:) (Expenses \$ including grants of \$ Neevenue \$) Communications or Communications with the industry, Federal government, state and local policy, makers, the media, opinion leaders and the general public. 4 (Code:) (Expenses \$ including grants of \$) (Revenue \$) Noticear Generation - Comprehensive management and bolary direction and industry coordination for the resolution of a broad range of generic technical and regulatory issues affecting nuclear power. 4 (Code:) (Expenses \$ including grants of \$) (Revenue \$) Sovernmental Affairs: Implegmentation of government relations policies, strategies and plans approved and promutgated by NEI and its members.		Check if Schedule O contains a response or note to any line in this Part III
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	4d	
	4e	

		2-1209124		Page 🕻
art	IV Checklist of Required Schedules		_	_
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
•	complete Schedule A	1		X
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	1	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3	+	X
4	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	· · · 4	+	+
3	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C			
	Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors		 ^	
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u> </u>
	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"		1	
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt			
	negotiation services? If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI	11a	ı X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b)	Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	44.		
اہ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110	-	Х
u	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	1446		
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		I X	Х
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	+	+^
•	the organization's separate of consolidated interiors statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	116	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>		† ^ `	+
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"		1	1
-	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		,	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		_	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		1	Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	1	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	4—	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 18

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Form 9	90 (2017)	Nuclear Energy Institute, Inc. 5	52-1209124	. Р	age 4
Part	: IV	Checklist of Required Schedules (continued)			
				Yes	No
20 a	Did the	organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Χ
b	If "Yes"	to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21		organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domest	ic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22		organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
		column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23		organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	•	ation's current and former officers, directors, trustees, key employees, and highest compensated			
		ees? If "Yes," complete Schedule J	23	X	
24a		organization have a tax-exempt bond issue with an outstanding principal amount of more than			
		00 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
		ough 24d and complete Schedule K. If "No," go to line 25a	. 24a	+	Х
		organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	
С		organization maintain an escrow account other than a refunding escrow at any time during the year			
		ase any tax-exempt bonds?	24c		
		organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		n 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
		tion with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	<u>25a</u>	+	
b		rganization aware that it engaged in an excess benefit transaction with a disqualified person in a			
		ar, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
00		? If "Yes," complete Schedule L, Part I	<u>25b</u>	+	
26		organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
		or former officers, directors, trustees, key employees, highest compensated employees, or ified persons? If "Yes," complete Schedule L. Part II.	200		_
27	-		26	1	Х
27		organization provide a grant or other assistance to an officer, director, trustee, key employee, tial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
		r family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
20	-	e organization a party to a business transaction with one of the following parties (see Schedule L,	21		_
28		instructions for applicable filing thresholds, conditions, and exceptions):			
•		nt or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
a b		member of a current or former officer, director, trustee, or key employee? If "Yes," complete	<u>20a</u>	+	^
D	,	the L. Part IV	28b		Х
•		y of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
C		officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29		organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>			X
30		organization receive contributions of art, historical treasures, or other similar assets, or qualified	. 23		
00		vation contributions? If "Yes," complete Schedule M	30		Х
31		organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	00		
•		· · · · · · · · · · · · · · · · · · ·	31		Х
32		organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	·	1	
		" complete Schedule N, Part II	32		Х
33		organization own 100% of an entity disregarded as separate from the organization under Regulations			
		s 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		Х
34		e organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
		/, and Part V, line 1....................................	34		Х
35a		organization have a controlled entity within the meaning of section 512(b)(13)?			Х
		to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
		ithin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	L	L
36		501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
		ation? If "Yes," complete Schedule R, Part V, line 2	36	<u>L</u>	
37	Did the	organization conduct more than 5% of its activities through an entity that is not a related organization			
		t is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part		1	
			37		Х
38	Did the	organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		1	
	19? No	te. All Form 990 filers are required to complete Schedule O	38	Χ	

52-1209124

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response or note to any line in this Part V

	Check in Contradic Contains a respense of note to any line in the fact v			$oldsymbol{oldsymbol{\sqcup}}$
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		
Za	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . (see instructions)	20	^	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		
ч	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
2-	against amounts due or received from them.)	40-		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	138		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
h	If "Yes " has it filed a Form 720 to report these nayments? If "No " provide an explanation in Schedule O	14h		<u> </u>

Part VI

Sect	ion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 49							
	If there are material differences in voting rights among members of the governing body, or							
	if the governing body delegated broad authority to an executive committee or similar							
	committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
	any other officer, director, trustee, or key employee?							
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		Х				
•	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х				
6	Did the organization have members or stockholders?	6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	Ť						
7 4	one or more members of the governing body?	7a		Х				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,							
D	stockholders, or persons other than the governing body?	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during							
Ū	the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached							
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х				
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C)					
		0 0:0:	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		Χ				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,							
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Χ					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"							
	describe in Schedule O how this was done	12c	Χ					
13	Did the organization have a written whistleblower policy?	13	Χ					
14	Did the organization have a written document retention and destruction policy?	14	Χ					
15	Did the process for determining compensation of the following persons include a review and approval by							
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Χ					
b	Other officers or key employees of the organization	15b	Χ					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement							
	with a taxable entity during the year?	16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard							
	the organization's exempt status with respect to such arrangements?	16b						
	ion C. Disclosure							
17 10	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an experientian to make its Forms 1023 (or 1024 if applicable), 900, and 900 T (Section F01(a)/3)	0.65	٠					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3) available for public inspection. Indicate how you made these available. Check all that apply.	s only	()					
	Own website Another's website X Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest police.	rv an	ıd					
13	financial statements available to the public during the tax year.	cy, an	iu					
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	•						
_0	NEI 202 739-8000	_						
	1201 F Street, NW, Suite 1100, Washington, DC 20004-1218							

1209124	Page 7
1209124	Page I

(14) Benjamin G.S. Fowke, III

Director

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. Position (do not check more than one (A) (B) (D) (E) (F) Reportable Name and Title Average box, unless person is both an Reportable Estimated hours per officer and a director/trustee) compensation compensation amount of week (list any Individual from from related other Key en Institutional hours for the organizations compensation related organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization organizations compensated below dotted and related trustee <u>е</u>е trustee line) organizations (1) Donald E Brandt 1.00 Chairman 0.00 X 1.00 (2) William D Johnson Vice Chairman 0.00 ×X 40.00 (3) Maria G Korsnick Χ President & CEO 0.00 Χ 2,095,550 455,433 (4) Nicholas K Akins 1.00 0.00 Χ Director (5) Ralph Alexander 1.00 0.00 Χ Director (6) Gerard M Anderson 1.00 0.00 Χ Director (7) A Christopher Bakken, IN 1.00 Χ 0.00 Director (8) Samuel L Belcher 1.00 Director 0.00 Χ 1.00 (9) James A Burke Director 0.00 Χ 1.00 (10) Stephen A Byrne Director 0.00 Х (11) Robert Decensi 1.00 0.00 Χ Director (12) Anthony F Earley, Jr. 1.00 0.00 Χ Director (13) Jack Edlow 1.00 Director 0.00 Χ

1.00

0.00

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
	(C)												
	(A)	(B)	Position (D)				(E)		(E)				
	(A) Name and title	(B) Average	(do not check more than one box, unless person is both an Reportable				Reportable	(E) Reportable	١,	(F) Estimate	d		
		hours per	offic	er an			or/truste		compensation	compensation		amount o	
		week (list any	or In	l m	Q	<u>₹</u>	en <u>H</u>	Fo	from	from related		other	··
		hours for related	dire	l iii	Officer	9	hes	Former	the organization	organizations (W-2/1099-MISC)		mpensat from the	
		organizations	dual	lion	¬	mpl	st co	_	(W-2/1099-MISC)	(,		ganizati	
		below dotted	r trus	<u>a</u>		Key employee	mg					nd relate	
		line)	Individual trustee or director	Institutional trustee		0	ens				OI	ganizatio	oris
				l e			Highest compensated employee						
(15)	Kamal Ghaffarian, Ph.D.	1.00									 		
Direc		0.00	Х										
	Timothy Gitzel	1.00											
Direc		0.00	Х							*			
	Jose E Gutierrez	1.00						4					
Direc		0.00	Х										
	Adam C Heflin	1.00											
Direc		0.00	Х										
(19)	Greg J Hempfling	1.00											
Direc		0.00	Х										
(20)	Wesley Hines, Ph.D.	1.00											
Direc	tor	0.00	Х										
(21)	John L Hopkins	1.00											
Direc	tor	0.00	Χ										
(22)	Michael W Howard, Ph.D.	1.00											
Direc	tor	0.00	Х										
(23)	Ralph Izzo, Ph.D.	1.00											
Direc	tor	0.00									<u> </u>		
	Dhiaa M Jamil	1.00											
Direc		0.00	Х								<u> </u>		
	Sue Kelly	1.00											
Direc		0.00	X								<u> </u>		
1b	Sub-total								2,095,550	0	 		,433
C	Total from continuation sheets to Part VII, So	ection A			٠				7,649,433	0	 	2,000	
d	Total (add lines 1b and 1c).	, , , , , , , , , , , , , , , , , , ,		<u></u>		<u></u>	· ·	<u> </u>	9,744,983	0	<u> </u>	2,456	,046
2	Total number of individuals (including but not lin				,	vno	receiv	/ed	more than \$100	,000 of			
	reportable compensation from the organization			8	0							lv	NI.
2	Did the executation list any former officer disc	etar artmustas	lana a		مررما		ar biab		t componented			Yes	NO
3	Did the organization list any former officer, dire employee on line 1a? <i>If "Yes," complete Sched</i>		•				_		•		3		~
											3		Х
4	For any individual listed on line 1a, is the sum of	•	•						•				
	the organization and related organizations great										_		
	individual										4	Х	
5	Did any person listed on line 1a receive or accr				-			_					
	for services rendered to the organization? If "Ye	es," complete Sc	hedu	ıle J	for	suc	h pers	son)		5		Χ
-	ion B. Independent Contractors												
1	Complete this table for your five highest compe												
	compensation from the organization. Report co	mpensation for t	ne ca	alen	dar	vea	ır endi	na	with or within the	e organization's	tax		

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.					
		I				
	(A)	(B)	ı			

N:	(B) Description of services	(C) Compensation	
APCO Worldwide	1299 Pennsylvania Ave Washington, DC 20004	Project Management	5,801,384
G4S Secure Solutions	1395 University Blvd Jupiter, FL 33458	Project Management	2,212,048
Canberra Industries, Inc	PO Box 27746 New York, NY 10087-7746	Project Management	1,662,174
Bully Pulpit Interactive LLC	1140 Connecticut Ave Washington, DC 20036	Advertising	1,129,201
Innovative Service Technology Ma	Office Services	657,805	
2 Total number of independent			

more than \$100,000 of compensation from the organization 43 Part VIII Statement of Revenue

		Check if Schedule O contains a response or r	note to any line in	this Part VIII			
				(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					exempt function	business revenue	excluded from tax under sections
	1a	Federated campaigns 1a	0		revenue		512-514
nts nts		Membership dues	0				
Gra	b	·					
ts,	C	Fundraising events	0				
ia gi	d	Related organizations	0			\	
Sin.	е	Government grants (contributions) 1e	0		\ \		
Contributions, Gifts, Grants and Other Similar Amounts	f	1, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,					
		similar amounts not included above <u>If</u>					
Cor	g	Noncash contributions included in lines 1a-1f: \$	0				
	h	Total. Add lines 1a–1f	Business Code	0			
Jue	_		Business Code		V.		
sve.	2a	Membership	900099	51,329,298	51,329,298		
8	b	Conferences	900099	3,448,411	3,448,411		
- ViC	С	Publications	900099	4,901	4,901		
Ser	d			0			
аш	е			0			
Program Service Revenue	f	All other program service revenue		0			
	g	Total. Add lines 2a–2f		54,782,610			
	3	Investment income (including dividends, interest,					
		other similar amounts)		1,190,256			1,190,256
	4	Income from investment of tax-exempt bond prod		0			
	5	Royalties	(ii) Personal	0			
	_		(II) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	C	Rental income or (loss)	0	0			
	d Za	Net rental income or (loss)	(ii) Other	0			
	7a	Cross arrivant from calco of					
	L	assets other than inventory 60,460,569	0				
	b	Less: cost or other basis and sales expenses 58,630,515	0				
	•	Gain or (loss)					
	C C	Net gain or (loss)	D	1,830,054			1,830,054
	d	Net gail of (loss)		1,030,034			1,030,034
<u>o</u>	8a	Gross income from fundraising					
Ĭ.	ou	events (not including \$ 0					
ě		of contributions reported on line 1c).					
5		See Part IV, line 18 a	0				
Other Revenue	b	Less: direct expenses b	0				
ō	C	Net income or (loss) from fundraising events	•	0			
		Gross income from gaming activities.		J			
		See Part IV, line 19 a	0				
	b	Less: direct expenses b					
		Net income or (loss) from gaming activities		0			
		Gross sales of inventory, less					
		returns and allowances a	0				
	b	Less: cost of goods sold b	0				
		Net income or (loss) from sales of inventory		0			
		Miscellaneous Revenue	Business Code				
	11a	Other	900099	1,763	1,763		
	b	Advertising	541800	13,960	,	13,960	
	C			0		-,,-	
	d	All other revenue		0			
	е	Total. Add lines 11a–11d		15,723			
	12	Total revenue See instructions	•	57 818 643	54 784 373	13 960	3 020 310

following SOP 98-2 (ASC 958-720)

	t IX Statement of Functional Expenses				
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all	columns. All other o	rganizations must c	omplete column (A).	
	Check if Schedule O contains a response or note	to any line in this Pa	art IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	domestic governments. See Part IV, line 21	845,195			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		_		
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	10,476,337		0	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	14,407,305		Y	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4,256,890			
9	Other employee benefits	1,034,805			
10	Payroll taxes	1,226,007			
11	Fees for services (non-employees):				
a	Management	0			
b	Legal	921,461			
С	Accounting	104,105			
d	Lobbying	112,900			
e	Professional fundraising services. See Part IV, line 17.	0			
f	Investment management fees	396,954			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0		0	
12	Advertising and promotion	0			
13	Office expenses	550,178			
14	Information technology	661,806			
15	Royalties	0			
16	Occupancy	3,938,998			
17	Travel	1,256,701			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,240,219			
20	Interest	0			
21		488,052	0	0	
22 23	Depreciation, depletion, and amortization	233,286	U	U	
24	Other expenses Itemize expenses not covered	233,260			
27	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Dua sura da assera	10,305,849			
b	Equipment Rental & Maintenance	798,909			
C	Drinting 9 Dublications	601,348			
d	Recruiting & Human Resources Services	120,367			
e	All other expenses Other	551,764			
25	Total functional expenses. Add lines 1 through 24e	56,529,436	0	0	(
26	Joint costs. Complete this line only if the	, , , , ,			
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here ▶ if				

52-1209124

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X Beginning of year End of year 250 1 250 2 2,445,168 2 5,757,605 3 0 3 432,718 221,788 4 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 0 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 0 6 0 7 0 8 0 8 1,242,701 9 Prepaid expenses and deferred charges . . . 9 1,450,104 Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 3,245,306 Less: accumulated depreciation 10b 1,662,210 10c 1,246,599 b Investments—publicly traded securities 11 21.201.212 11 29.074.780 12 Investments—other securities. See Part IV, line 11 12 0 0 13 Investments—program-related. See Part IV, line 11. . . . 0 13 14 14 0 0 15 Other assets. See Part IV, line 11 9.574.440 15 2,229,799 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 36,558,699 39,980,925 35,430,217 17 17 32,916,450 18 18 19 Deferred revenue 2,250,456 19 4,849,141 20 0 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . . . 716,179 21 1,350,867 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and 22 Secured mortgages and notes payable to unrelated third parties 23 23 0 0 Unsecured notes and loans payable to unrelated third parties 0 24 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete 25 0 Total liabilities. Add lines 17 through 25 26 38,396,852 26 39,116,458 Organizations that follow SFAS 117 (ASC 958), check here | X | and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . 27 -1,838,153 864.467 28 0 28 0 29 Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds 0 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 0 31 0 32 32 Retained earnings, endowment, accumulated income, or other funds . . . 33 -1,838,153 33 864,467 Total liabilities and net assets/fund balances 36,558,699 39,980,925

Form 9	990 (2017) Nuclear Energy Institute, Inc.	52-1209) 124	Pag	ge 12
Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. [Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5	7,818	3,643
2		2	5	6,529	,436
3	Revenue less expenses. Subtract line 2 from line 1	3		1,289	,207
4		4	-	1,838	3,153
5	Net unrealized gains (losses) on investments	5		-246	,943
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	В			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1,660	,356
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	0		864	1,467
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other	Ī			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	[2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	Ī			
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	- 1	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			^	
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	ŀ	0-	V	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
0 -	Schedule O.	ŀ			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				V
	the Single Audit Act and OMB Circular A-133?	٠٠.	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		_		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>

Form **990** (2017)

Continuation Sheet for Form 990

Page 1 of 3

Name of the Organization

Part VII Section A

Employer identification number

52-1209124

Nuclear Energy Institute, Inc.

Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees										
(A)	(B)		(C) Position (check all that apply)				(D)	(E)	(F)	
Name and title	Average	-	· ·	chec	k all	that ap		Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(26) Dennis L Koehl	1.00									
Director	0.00	- -								
(27) Paul D Koonce	1.00	_								
Director	0.00	- -								
(28) Stephen E Kuczynski	1.00	_								
Director	0.00	- -								
(29) Thomas R Kuhn	1.00	_			Н					
Director	0.00	- -			Γ.					
(30) Art Lembo	1.00				7					
Director	0.00	-								
(31) Jim Matheson	1.00									
Director	0.00	- -								
(32) Sean McGarvey	1,00	_								
Director	0.00	F.B.								
(33) Lee McIntire	1.00			H						
Director	0.00	5 E.								
(34) Michael P McMahon	1.00									
Director	0.00									
(35) Mark McManus	1.00	_								
Director	0.00	Sh.								
(36) Gary M Mignogna	1.00									
Director	0.00	- -								
(37) Michael L Moehn	1.00	_								
Director	0.00	- -								
(38) Mano K Nazar	1.00									
Director	0.00	- 1								
(39) Michael J Pacilio	1.00									
	0.00									
Uirector (40) Mark T Peters, Ph.D.	1.00	1								
Director	0.00	- -								
(41) Daniel B Poneman	1.00		 							
Director	0.00	- -								
(42) Patrick L Pope	1.00					+				
Director	0.00	- -								
(43) Mark E Reddemann	1.00					+				
Director	0.00	- -		1		1				
(44) Kenneth W Robuck	1.00			\vdash	\vdash	+				
Director	0.00	- 1								
	1.00			\vdash			\vdash			
(45) Barbara Rusinko		- -								
Director (46) Pruce A Sassi	0.00		<u> </u>	\vdash		+				
(46) Bruce A Sassi	1.00	- -		1		1				
Director	0.00	X	<u> </u>		<u> </u>	1				

Continuation Sheet for Form 990

Page 2 of 3

Name of the Organization

Employer identification number

52-1209124

Nuclear Energy Institute, Inc.
Part VII Section A

Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees										
(A)	(B)	(C)				(D)	(E)	(F)		
Name and title	Average	Posit	tion (chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per	or Ind	Ins	읔	₹e	en Eig	ᆼ	compensation	compensation	amount of
	week (list any	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the	from related organizations	other compensation
	hours for	ual t	iona		plo	t co	~	organization	(W-2/1099-MISC)	from the
	related	rust	= =		/ee	l mpg		(W-2/1099-MISC)		organization
	organizations below dotted	99	iste			esane				and related organizations
	line)		l w			ited				Organizations
(47) Kris P Singh, Ph.D.	1.00									
Director	0.00	Х								
(48) Lonnie R Stephenson	1.00									
Director	0.00	Х								
(49) Kathryn M Sutton, Esq.	1.00									
Director	0.00	Х								
(50) Douglas E True	1.00									
Director	0.00	Х								
(51) George D Turner	1.00				7					
Director	0.00	Х								
(52) Chris Tye	1.00									
Director	0.00	Х				47	1			
(53) Thomas R White	1,00									
Director	0.00	Х								
(54) Jay T Wileman	1.00									
Director	0.00	X								
(55) Robert F Willard	1.00									
Director	0.00	X								
(56) Marvin S Fertel	40.00									
President & CEO	0.00			Х				986,296		0
(57) Ellen C Ginsberg	40.00									
VP, General Counsel & Secretary	0.00			Х				714,284		304,875
(58) Neal Cohen	40.00									
Senior Vice President	0.00			Х				676,110		141,581
(59) Anthony Pietrangelo	40.00									
Vice President	0.00			Χ				592,157		67,768
(60) Phyllis M Rich	40.00									
EVP, CFO & Treasurer	0.00			Χ				598,756		308,513
(61) Joseph Pollock	40.00									
Vice President	0.00			Χ				505,779		213,228
(62) Daniel Lipman	40.00									
Vice President	0.00			Х				524,724		111,611
(63) Pamela Cowan	40.00									
Vice President	0.00			Х				357,396		96,735
(64) John Kotek	40.00									
Vice President	0.00			Х				351,125		90,884
(65) Beverly Marshall	40.00									
Vice President	0.00			Х				302,122		109,314
(66) Alexander Flint	40.00									
Vice President	0.00			Х	<u> </u>			321,300		1,022
(67) Walter Hill	40.00						1			
Sr. Director, Communications	0.00			Χ				301,168		22,396

Continuation Sheet for Form 990

Page 3 of 3

Name of the Organization
Nuclear Energy Institute, Inc.

Employer identification number

52-1209124

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees										
(A)	(B)	(C)				(D)	(E)	(F)		
Name and title	Average		_	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Ins	₽	Key	Hig em	Fo	compensation from	compensation from related	amount of other
	(list any	ividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the	organizations	compensation
	hours for	ual ti otor	ona		ploy	ee cor]	organization	(W-2/1099-MISC)	from the
	related	rust	Ī		ee e	npe		(W-2/1099-MISC)		organization and related
	organizations below dotted	l e	stee			nsat				organizations
	line)					ed				
(68) Jon Wentzel	40.00			-	-	-				
Vice President	0.00			Х				186,164		40,046
(69) John McIntire	40.00			T.				100,101		10,010
Executive Director & CIO	0.00	÷				X		310,725		71,009
(70) Russell Bell	40.00									,
Sr. Tech Advisor	0.00					X		229,668		114,006
(71) John Butler	40.00									
Sr. Tech Advisor	0.00		<u>L</u>			X		235,633		100,994
(72) Robert L Dubrow	40.00									
Sr. Dir., Controller & Assistant Treasurer	0.00					X		205,670		127,938
(73) Susan H Perkins-Grew	40.00									
Sr. Director	0.00					X		250,356		78,693
(74)										
(75)										
(76)										
		l '								
(77)										
(70)						-				
(78)										
(79)										
(19)										
(80)										_
(04)					-					
(81)										
(82)										
(83)				_	-					
(03)										
(84)										
(85)										
						-				
(86)										
(87)										
			<u> </u>	1	<u> </u>	1				
(88)		-								
						1				

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

2017

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• 5	Section 501(c)(4), (5), or (6) o	rganizations: Complete Part III.			*		
Nam	e of organization			Emplo	yer identification number		
	lear Energy Institute, Inc.				52-1209124		
Pa		the organization is exempt ur					
1		he organization's direct and indirect	political campaign	activities in Part IV. (see i	nstructions for		
	definition of "political cam						
2		y expenditures (see instructions).					
3		cal campaign activities (see instruct					
		the organization is exempt ur					
1	Enter the amount of any of	excise tax incurred by the organizat	ion under section 49	955	\$		
2	Enter the amount of any of	excise tax incurred by organization	managers under se	ction 4955	\$ 		
3	•	ed a section 4955 tax, did it file Forn			_ = =		
4a					Yes No		
b	If "Yes," describe in Part						
Pa		the organization is exempt ur			1(c)(3).		
1		expended by the filing organization		•			
					\$		
2	2 Enter the amount of the filing organization's funds contributed to other organizations for section						
		vities			\$		
3							
	line 17b						
4		n file Form 1120-POL for this year?					
5		ses and employer identification num					
		ents. For each organization listed, e					
		ntributions received that were prom d fund or a political action committed					
	as a separate segregated						
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and		
				funds. If none, enter -0	promptly and directly		
					delivered to a separate political organization. If		
					none, enter -0		
					_		
(1)			:- Y				
					_		
(2)							
(3)							
/A\							
(4)							
(5)							
(5)							
(6)							
/		1	1				

OGII	cadic 0 (1 01111 330 01 330 LZ) 2017					Page ∠	
P	art II-A Complete if the organization under section 501(h)).	on is exempt	under section 5	01(c)(3) and filed	d Form 5768 (ele		
Α	Check ▶ if the filing organization b	-	•		-	up member's	
В	name, address, EIN, exp Check ▶ if the filing organization of			, .	,		
	Limits on Lob (The term "expenditures" r	bying Expendit means amounts			(a) Filing organization's totals	(b) Affiliated group totals	
1a	Total lobbying expenditures to influence pu	ublic opinion (gra	ss roots lobbying) .			0	
b	Total lobbying expenditures to influence a	legislative body	(direct lobbying).			0	
С	Total lobbying expenditures (add lines 1a a	and 1b)			0	0	
d	Other exempt purpose expenditures					0	
е	Total exempt purpose expenditures (add li	nes 1c and 1d).			0	0	
f	Lobbying nontaxable amount. Enter the an	nount from the fo	llowing table in bot	h	·		
	columns.				0	0	
	If the amount on line 1e, column (a) or (b) is	: The lobbying	ıg nontaxable amοι	int is:			
	Not over \$500,000		mount on line 1e.				
	Over \$500,000 but not over \$1,000,000		us 15% of the excess				
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 pit \$1,000,000.	us 5% of the excess of	over \$1,500,000.			
_	Over \$17,000,000				0	0	
g	Grassroots nontaxable amount (enter 25%				0	0	
n :	h Subtract line 1g from line 1a. If zero or less, enter -0						
!	If there is an amount other than zero on eit					0	
J	section 4911 tax for this year?					Yes No	
						res No	
		- /	Period Under sed		£ 41 £1 1	la al acce	
	(Some organizations that made a s		truction do not nav	-	of the five columns	below.	
			es During 4-Year A				
	Lobby		3 During 4-1 cui A	Trendship i enod			
	Calendar year (or fiscal year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total	
	beginning in)						
2a	Lobbying nontaxable amount	0	0	0	0	0	
b	Lobbying ceiling amount (150% of line 2a, column(e))					0	
С	Total lobbying expenditures	0	0	0	0	0	
d	Grassroots nontaxable amount	0	0	0	0	0	
е	Grassroots ceiling amount (150% of line 2d, column (e))					0	
f	Grassroots lobbying expenditures	0	0	0	0	0	

Schedule C (Form 990 or 990-EZ) 2017

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	l Forr	n 5768	3	
For 6	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(8	a)		(b)	
	ription of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a b	Volunteers?					
c d	Media advertisements?					
e f g	Publications, or published or broadcast statements?					
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?					
j 2a b	Total. Add lines 1c through 1i					(
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
Part	Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	or se	ection		
	501(c)(6).					
1	Were substantially all (90% or more) dues received nondeductible by members?			1	Yes	No X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					X
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye				Х	
Part	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."					3, is
1	Dues, assessments and similar amounts from members		1		51,32	9,298
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		00		4.40	0.05
a	Current year	.]	2a 2b			9,65° 3,690
C	Total	- 1	2c			5,090 5,96
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	. 1	3			8,202
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible					,
_	lobbying and political expenditure next year?		4			
5 Part	Taxable amount of lobbying and political expenditures (see instructions)		5		-90	2,24
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list): F	Part II-	A. lines	1 and	b
	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.					-

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.

990.	2017
or 12b.	Open to Public Inspection
Employer identification n	umber

Nucl	ear Energy Institute, Inc.		52-1209124
Par		Advised Funds or Other Similar Ful	nds or Accounts.
	Complete if the organization answer	ed "Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and don	or advisors in writing that the assets held in	n donor advised
	funds are the organization's property, subject to	to the organization's exclusive legal control	? Yes No
6	Did the organization inform all grantees, donor	rs, and donor advisors in writing that grant f	funds can be
	used only for charitable purposes and not for t	he benefit of the donor or donor advisor, or	for any other
	purpose conferring impermissible private bene	fit?	Yes No
Par	Conservation Easements.		
		ed "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by		
	Preservation of land for public use (e.g., re		n of a historically important land area
	Protection of natural habitat		n of a certified historic structure
		Treservation	n or a certified historic structure
•	Preservation of open space		
2	Complete lines 2a through 2d if the organization	on neid a qualified conservation contribution	
	easement on the last day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		
b	Total acreage restricted by conservation easer Number of conservation easements on a certif		
c d	Number of conservation easements on a certification of conservation casements included in		<u>2</u> c
u	historic structure listed in the National Register		2d
3	Number of conservation easements modified,		<u> </u>
Ū	the tax year	transientes, releases, extinguishes, or term	indica by the organization damig
4	Number of states where property subject to co	nservation easement is located	
5	Does the organization have a written policy re		handling of
	violations, and enforcement of the conservation		
6	Staff and volunteer hours devoted to monitoring, in		
	>	g,g	
7	Amount of expenses incurred in monitoring, inspec	ting, handling of violations, and enforcing conse	ervation easements during the year
	▶ \$		
8	Does each conservation easement reported or	n line 2(d) above satisfy the requirements o	of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization repo	orts conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the to	ext of the footnote to the organization's fina	ncial statements that describes
	the organization's accounting for conservation		
Par		ions of Art, Historical Treasures, or	
		ed "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under		
	works of art, historical treasures, or other simil	•	
	of public service, provide, in Part XIII, the text		
b	If the organization elected, as permitted under		
	works of art, historical treasures, or other simil		on, or research in furtherance
	of public service, provide the following amount		
	(i) Revenue included on Form 990, Part VIII, I		• \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of an		ts for financial gain, provide the
	following amounts required to be reported und		
а	Revenue included on Form 990, Part VIII, line		
b	Assets included in Form 990, Part X		▶ \$

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value	
1a	Land	0	0		0	
b	Buildings	0	0	0	0	
С	Leasehold improvements	0	1,942,285	815,545	1,126,740	
d	Equipment	0	2,549,620	2,429,761	119,859	
е	Other	0	0	0	0	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶						

Schedule D (Form 990) 2017 Nuclear Energy Institut	e, Inc.	5	52-1209124	Page 3
Part VII Investments—Other Securiti	ies.			
Complete if the organization a	nswered "Yes" on Form 990), Part IV, line 11b. See Form	990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m		
(1) Financial derivatives	. 0			
(2) Closely-held equity interests	. 0			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 1	(2.) • 0			
Part VIII Investments—Program Rela	· · · ·			
Complete if the organization a), Part IV, line 11c. See Form	990, Part X,	line 13.
(a) Description of investment	(b) Book value	(c) Method of value		
(4)		Cost or end-of-year m	arket value	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	13.) ▶ 0			
Part IX Other Assets.				
Complete if the organization a	nswered "Yes" on Form 990 (a) Description), Part IV, line 11d. See Form	990, Part X, (b) Book va	
(1) Accrued Interest	(a) Description		(b) BOOK VA	153,614
(2) Cash Surrender Value of Insurance				2,076,185
(3)	_			_,070,100
(4)				
(5)			-	
(6)	<u> </u>			
(7)				
(8)				
(9)	,			
Total. (Column (b) must equal Form 990, Part X, col.	(B) line 15.)	<u></u>	2	2,229,799
Part X Other Liabilities. Complete if the organization a	nswered "Yes" on Form 990), Part IV, line 11e or 11f. See	Form 990, F	Part X,
line 25.		,	<u> </u>	,
1. (a) Description of liability	(b) Book value			
(1) Federal income taxes	0			
(2)				
(3)				
(4)				
(5)				
(8)				
\~/				

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

Part		e per Re	eturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total revenue, gains, and other support per audited financial statements	🛓	1	57,174,746
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	_		
а		246,943		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d	A · L	2e	-246,943
3	Subtract line 2e from line 1		3	57,421,689
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	396,954		
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	396,954
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	57,818,643
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	ses per	Retur	'n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		1	56,132,482
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	56,132,482
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	_		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 3	396,954		
b	Other (Describe in Part XIII.)			
С	Add lines 4a and 4b		4c	396,954
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	56,529,436
Part	XIII Supplemental Information.			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and			4; Part X, line
2; Pa	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additiona	l informati	ion.	
Part I	V Line 2b NEI administers voluntary programs for its members. NEI acts as a fiscal			
agent	t for the programs and has no control over the disbursements of the funds. Therefore,			
NEI d	loes not recognize revenue or expenses in its statement of activities and changes in			
net as	ssets for these programs. Funds received by NEI for which disbursements have not yet			
hoon	paid are presented as funds held for others in the audited statements of financial			
DECII	paid are presented as funds field for others in the addited statements of infancial			
nociti	on			
positi	on.			
Part >	X Line 2 NEI has adopted, Accounting for Uncertainty in Income Taxes, which requires			
thatu	incertain tax positions be evaluated and the potential impact of an unfavorable			
lilal u	incertain tax positions be evaluated and the potential impact of an unlavorable			
outco	me of a tax authority's assessment of such uncertain tax position be reflected in the			
financ	cial statements. From time to time, management must assess the need to accrue or			
disclo	ose a possible loss contingency for proposed adjustments from various federal and			
4,0010	22 2 possession root containguity for proposed dejustribute from various federal and			
state	tax authorities who may audit the organization in the normal course of businesss.			
NEI h	has evaluated it tax reporting and has not reflected any contingent liability for any			

Part XIII Supplemental Information (continued)
potential assessment. In the event there were any proposed adjustments, any associated
penalties and interest would be separately reported. The organization is no longer subject
to examinations by relevant tax authorities for years prior to 2014.
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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Nuclear Energy Institute, Inc.

Part I

Name of the organization

General Information on Grants and Assistance

Grants and Other Assistance to Organizations, Governments, and Individuals in the United State

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 ► Attach to Form 990.

ares	or 22.	

Open to Public OMB No. 1545-0047 Inspection Employer identification number

▶ Go to www.irs.gov/Form990 for the latest information.

52-1209124

_	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	records to subs	stantiate the amour	nt of the grants or assis	tance, the grantees' e	ligibility for the grants o	r assistance, and	30X ×
2	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	tion's procedur	res for monitoring the	he use of grant funds in	the United States.]
Part	t II Grants and Other Assistance to Domestic Or	sistance to I	Domestic Orgar	ganizations and Domestic Governments. Complete if the organization answered "Yes" on Form	stic Governments	. Complete if the org	anization answered	d "Yes" on Form
	990, Part IV, line 21, for any recipient that receiv	or any recipie	ent that received	ed more than \$5,000. Part II can be duplicated if additional space is needed.	art II can be duplica	ated if additional spa	ce is needed.	
7	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) B 1225	(1) Bipartisan Policy Center, Inc 1225 Eye Street, NW Washington, DC	73-1628382	501(c)(3)	265,000				Contribution
(2) N 7700		84-0772595	501(c)(3)	131,230				Contribution
(3) EPRI 13014 C	ollections Center Drive Chicag	23-7175375	501(c)(3)	30,000				Contribution
(4) C 1700	(4) Congressional Institute, Inc.	52-1504189	501(c)(4)	27,500				Contribution
(5) A 2300	(5) Aspen Institute 2300 N Street, NW Washington, DC 2 8	84-0399006	501(c)(3)	25,000				Contribution
(6) B 1155		26-4336291	501(c)(6)	25,000				Contribution
(7) F 514 '	(7) Ford's Theatre Society 514 10th Street NW Washington, DC 2 5	52-6073157	501(c)(3)	25,000				Contribution
(8) A 9778		81-1658523	501(c)(3)	16,215				Contribution
(9) S 481 I	(9) State Legislative Leaders Foundati 481 Main Street Centerville, MA 02632	23-7148478	501(c)(3)	15,000				Contribution
10) N 1707	(10) National Energy Resources Organi 1707 Prince Street Alexandria, VA 223 9	91-1850125	501(c)(3)	12,850				Contribution
11) N 1101	1101 Vermont Avenue, NW Washingto 5	53-0204609	501(c)(4)	10,500				Contribution
(12) C 701 F	112) Center For Energy Workforce Deve 701 Pennsylvania Ave. NW Washingto 2	20-4504014	501(c)(3)	10,000				Contribution
7	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	11(c)(3) and go	vernment organiza	tions listed in the line 1	table		• • • • • • •	36
က	Enter total number of other organizations listed in the line 1 table	inizations listed	d in the line 1 table				• • • • • • •	•

For Paperwork Reduction Act Notice, see the Instructions for Form 990. $_{\rm HTA}$

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017)

Page 2

Schedule I (Form 990) (2017) (f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part III 8 က 4 2 9

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N (h) Purpose of grant or assistance ō Contribution **Employer identification number** Page 52-1209124 (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (f) Method of valuation (book, FMV, appraisal, (e) Amount of non-cash assistance 10,000 10,000 10,000 10,000 10,000 10,000 10,000 10,000 8,000 500 6,300 6,000 6.000 8.000 7,500 10,000 5.000 (d) Amount of cash (c) IRC section if 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3)501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(3) 501(c)(4) 501(c)(3) 501(c)(3)501(c)(6) 501(c)(3) applicable 57-0976265 52-0806696 13-3517803 20-4561025 52-1686163 57-0835114 59-1361955 53-0220900 54-1980898 75-2351673 52-1714100 52-1755403 23-7424444 52-1429544 81-2118591 52-2236921 86-0945757 (b) EIN 233 Pennsylvania Avenue, SE Washington, D 100 Maryland Ave. NE Washington, DC 20002 499 South Capitol St. SW Washington, DC 20 1619 Massachusetts Ave NW Washington, DC 360 Park Avenue South New York, NY 10010 110 North Carolina Avenue SE Washington, D 1022 Chena Pump Road Fairbanks, AK 99707 7910 Woodmont Ave. Ste 400 Bethesda,, MD 71 Lighthouse Road, Suite 4200 Hilton Head Is (15) James E. Clyburn Research and Scholar 5400 LBJ Freeway Ste 985 Dallas, TX 75240 805 15th Street NW Washington, DC 20005 (24) Congressional Sportsmen's Foundation 815 16th Street NW Washington, DC 20006 11130 Sunrise Valley Dr. Reston, VA 20191 1616 P Street NW Washington,, DC 20036 1600 Duke Street Alexandria.. VA 22314 104 Hume Avenue Alexandria, VA 22301 P.O. Box 77263 Washington, DC 20013 (a) Name and address of organization (22) Congressional Sports for Charity (13) Foundation For Nuclear Studies (29) American Association of Blacks (18) National Council on Radiation (27) Center for Legislative Energy (28) Heritage Classic Foundation (19) Prevent Cancer Foundation Nuclear Energy Institute, Inc. (16) Johns Hopkins University (17) NABTU Conference Fund (20) Resources for the Future or government (21) Creative Coalition/EFT (25) Waterfall Foundation Name of the organization (23) NGS Shootout (14) Horton's Kids (26) EUCG, Inc.

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(f) Description of non-cash assistance oţ Page 1 Employer identification number 52-1209124 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance Continuation of Grants and Other Assistance to Individuals in the United States (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Nuclear Energy Institute, Inc. Name of the organization Part III 9 14 15 18 26 12 13 16 19 20 25 11 17 22 23 24 7 œ တ

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

52-1209124

Internal Revenue Service

Name of the organization

Nuclear Energy Institute, Inc.

Department of the Treasury

Employer identification number

Questions Regarding Compensation Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. X First-class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Tax indemnification and gross-up payments Health or social club dues or initiation fees Personal services (such as, maid, chauffeur, chef) Discretionary spending account If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Х Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 2 Χ Indicate which, if any, of the following the filing organization used to establish the compensation of the 3 organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Written employment contract X Compensation committee X Independent compensation consultant X Compensation survey or study X Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? 4a Χ Χ 4b 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 5 compensation contingent on the revenues of: The organization? 5a Any related organization? 5b If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of: The organization?. 6a Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 payments not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .

52-1209124

Nuclear Energy Institute, Inc. Schedule J (Form 990) 2017

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

Note: The suff of columns (B)(I)—(III) for each listed illotylodal filds; equal the	ı IIstea I	(B) Breakdown of W-	ine total afflount of Form 990, Part VII, W-2 and/or 1099-MISC compensation	C compensation	Ion A, Iline Ta, applica	ible column (D) and (, Section A, line 1a, applicable column (D) and (E) amounts for that individual	laiviauai.
(A) Name and Title		(i) Base		(iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported
		compensation	compensation	reportable compensation	compensation			as deferred on prior Form 990
Maria G Korsnick	Θ	1,191,094	000'006	4,456	432,300	23,133	2,550,983	
1 President & CEO	€						0	
Marvin S Fertel	(E)	0	986,297	0	0	0	986,297	
2 President & CEO	€						0	
Ellen C Ginsberg	Ξ	349,401	139,250	225,632	61,214	21,709	797,206	221,953
3 VP, General Counsel & Secretary	(ii)						0	
Neal Cohen	(<u>i</u>)	579,848	000'06	6,262	119,538	22,043	817,691	
4 Senior Vice President	(ii)						0	
Anthony Pietrangelo	(i)	17,157	154,610	420,390	65,340	2,428	659,925	
5 Vice President	(ii)						0	
Phyllis M Rich	(i)	425,631	164,517	809'8	305,011	3,502	907,269	
6 EVP, CFO & Treasurer	Œ						0	
Joseph Pollock	(<u>i</u>)	384,009	113,098	8,672	195,029	18,199	719,007	
7 Vice President	(ii)						0	
Daniel Lipman	(i)	295,678	125,308	103,738	12,103	1,964	538,791	97,543
8 Vice President	Œ							
Pamela Cowan	Ξ	304,796	48,264	4,335	83,727	13,008	454,130	
9 Vice President	(ii)						0	
John Kotek	(i)	287,513	000'09	3,611	68,220	22,664	442,008	
10 Vice President	Œ						0	
Beverly Marshall	Ξ	247,219	35,268	19,635	98,345	10,970	411,437	
11 Vice President	(ii)						0	
Alexander Flint	Ξ	0	0	321,300	0	1,022	322,322	
12 Vice President	(ii)						0	
Walter Hill	(i)	97,377	104,649	99,142	10,285	12,111	323,564	
13 Sr. Director, Communications	(ii)						0	
Jon Wentzel	(E)	167,693	15,000	3,471	34,215	5,830	226,209	
14 Vice President	E						0	
John McIntire	Ξ	247,873	51,938	10,914	49,625	21,385	381,735	
15 Executive Director & CIO	(ii)						0	
Russell Bell	Ξ	197,944	30,913	810	92,817	21,189	343,673	
16 Sr. Tech Advisor	≘						0	
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Schedule J (Form 990) 2017

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		Continuation		Sheet for Schedule J (Form 990)	J (Form 99	(0	Page	te 1 of 1
Name of the organization							Employer identification number	
Nuclear Energy Institute, Inc.							52-1209124	
Part II Continuation of Officers, Directors, Trustees, Key El	Direc	tors, Trustees, K	ey Employees, a	mployees, and Highest Compensated Employees	pensated Empl	oyees		
		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	eldexetaoN (d)	(F) Total of columns	(E) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(a)-(i)(a)	reported in prior Form 990 or Form 990-EZ
John Butler	Ξ	200,601	33,595	1,437	1,437	21,249	258,319	
17 Sr. Tech Advisor	(ii)						0	
Robert L Dubrow	(E)	167,600	37,065	1,006	1,006	22,179	228,856	
18 Sr. Dir., Controller & Assistant Treasur								
Susan H Perkins-Grew	<u>(i)</u>	214,807	34,667	882	882	1,527	252,765	
19 Sr. Director	(iii)						0	
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Employer identification number Nuclear Energy Institute, Inc. 52-1209124 Form 990, Part VI, Section B, Line 11b: Audit Committee will review form in detail with auditor. Upon satisfaction, the full Board will receive a copy and will be given reasonable time to review and ask questions before the return is filed Form 990, Part VI, Section B, Line 12c: Employees are required to sign a conflict of interest report annually to confirm that they understand the policy and that they have disclosed any conflict of interest or appearance of conflict of interest Form 990, Part VI, Section B, Line 15: Salaries for all NEI positions are benchmarked against industry standards, using mid-to-large-sized not-for-profit organizations as key comparators. All officer positions are evaluated against a compensation scoring system that ensures the salary range for the position is set relative to the position's internal and external responsibilities. CEO and officer positions are also benchmarked against industry standards annually using the same comparator group as the other positions. The review is performed by an external consultant who provides recommendations to the Organization & Compensation Committee of the NEI Executive Committee. Those recommendations, if approved by the Organization & Compensation Committee, are then provided to the Executive Committee for the Executive Committee's final approval. Form 990, Part VI, Section C, Line 19: NEI did not have a request for documents during the year. NEI will make the documents available upon request. Form 990, Part XI, Line 9: Actuarial gains and losses for the defined benefit and post retirement plans totaled \$1,660,356

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization	Employer identification number
	52-1209124
Hadical Energy mentato, me.	02 1200121